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B6 Summary (Official Form 6 - Summary) (12/07)

# United States Bankruptcy Court Western District of Pennsylvania

| In re | Mitchell R Sinclair |        | Case No | 09-24077 |  |
|-------|---------------------|--------|---------|----------|--|
| -     |                     | Debtor | ,       |          |  |
|       |                     |        | Chapter | 13       |  |
|       |                     |        |         |          |  |

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|--|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property  | Yes                  | 1                | 37,000.00         |             |          |
| B - Personal Property  | Yes                  | 3                | 66,991.00         |             |          |
| C - Property Claimed as Exempt   | Yes                  | 1                |                   |             |          |
| D - Creditors Holding Secured Claims   | Yes                  | 1                |                   | 36,038.00   |          |
| E - Creditors Holding Unsecured<br>Priority Claims (Total of Claims on Schedule E) | Yes                  | 1                |                   | 0.00        |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 4                |                   | 53,106.22   |          |
| G - Executory Contracts and<br>Unexpired Leases                                    | Yes                  | 1                |                   |             |          |
| H - Codebtors  | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                      | Yes                  | 1                |                   |             | 3,265.39 |
| J - Current Expenditures of Individual<br>Debtor(s)                                | Yes                  | 2                |                   |             | 2,091.00 |
| Total Number of Sheets of ALL Schedu   | ıles                 | 16               |                   |             |          |
|  | T                    | otal Assets      | 103,991.00        |             |          |
|  |                      |                  | Total Liabilities | 89,144.22   |          |

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Form 6 - Statistical Summary (12/07)

# United States Bankruptcy Court Western District of Pennsylvania

| In re | Mitchell R Sinclair |        | Case No. | 09-24077 |
|-------|---------------------|--------|----------|----------|
| •     |                     | Debtor | ,        |          |
|       |                     |        | Chapter  | 13       |

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C.  $\S$  159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E)  | 0.00   |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 0.00   |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00   |
| Student Loan Obligations (from Schedule F)  | 0.00   |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00   |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00   |
| TOTAL   | 0.00   |

#### State the following:

| Average Income (from Schedule I, Line 16)  | 3,265.39 |
|--|----------|
| Average Expenses (from Schedule J, Line 18)  | 2,091.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 4,533.64 |

#### State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY"     column              |      | 29.00     |
|--|------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 0.00 |           |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |      | 0.00      |
| 4. Total from Schedule F   |      | 53,106.22 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |      | 53,135.22 |

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B6A (Official Form 6A) (12/07)

| In re | Mitchell R Sinclair |        | Case No | 09-24077 |  |
|-------|---------------------|--------|---------|----------|--|
| _     |                     | Debtor |         |          |  |

## **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| 621 Clark Ave.<br>Jeannette, PA      | Fee simple                                 | -   | 37,000.00  | 22,819.00                  |
|--------------------------------------|--|---|--|----------------------------|
| Description and Location of Property | Nature of Debtor's<br>Interest in Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in<br>Property, without<br>Deducting any Secured<br>Claim or Exemption | Amount of<br>Secured Claim |

FMV based on 2005 appraisal

Sub-Total > 37,000.00 (Total of this page)

37,000.00 Total > (Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

| In re | Mitchell R Sinclair |        | Case No. | 09-24077 |  |
|-------|---------------------|--------|----------|----------|--|
|       |                     | Debtor |          |          |  |

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | Type of Property  | N O Description and Location of Property E          | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|---|---|--|
| 1.  | Cash on hand  | cash  | -   | 100.00   |
| 2.  | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | PNC Bank ( checking account )                       | -   | 400.00   |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | Х   |   |  |
| 4.  | Household goods and furnishings, including audio, video, and computer equipment.  | general assortment of household goods & furnishings | -   | 3,000.00   |
| 5.  | Books, pictures and other art<br>objects, antiques, stamp, coin,<br>record, tape, compact disc, and<br>other collections or collectibles.   | Х   |   |  |
| 6.  | Wearing apparel.  | general assortment of clothing                      | -   | 500.00   |
| 7.  | Furs and jewelry.   | x   |   |  |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | fishing equipment                                   | -   | 1,000.00   |
| 9.  | Interests in insurance policies.<br>Name insurance company of each<br>policy and itemize surrender or<br>refund value of each.  | X   |   |  |
| 10. | Annuities. Itemize and name each issuer.  | х   |   |  |
|     |   |   |   |  |
|     |   |   | Sub-Total (Total of this page)              | al > 5,000.00  |

2 continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

| In re | Mitchell R Sinclair | Case No09-24077 |
|-------|---------------------|-----------------|
|       |                     |                 |

Debtor

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     |   |                  | (Continuation Sheet)                  |          |   |   |
|-----|---|------------------|---------------------------------------|----------|---|---|
|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property  |          | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | х                |                                       |          |   |   |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing  |                  | PNC Carpenters Savings & Annuity Fund |          | -   | 9,000.00  |
|     | plans. Give particulars.  |                  | Carpenters Combined Funds ( pension ) |          | -   | 33,411.00   |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   | X                |                                       |          |   |   |
| 14. | Interests in partnerships or joint ventures. Itemize.   | X                |                                       |          |   |   |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.  | X                |                                       |          |   |   |
| 16. | Accounts receivable.  | X                |                                       |          |   |   |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X                |                                       |          |   |   |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X                |                                       |          |   |   |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.  | X                |                                       |          |   |   |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                       |          |   |   |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |                                       |          |   |   |
|     |   |                  |                                       | (Total o | Sub-Tota<br>of this page)                   | al > <b>42,411.00</b>   |

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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**B6B** (Official Form 6B) (12/07) - Cont.

| In re | Mitchell R Sinclair | Case No09-24077 |
|-------|---------------------|-----------------|
|       |                     |                 |

Debtor

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property         | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--|---|---|
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | X                |  |   |   |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | X                |  |   |   |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | x                |  |   |   |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.  |                  | Chevy Silverado ( 40,000 miles, good ition ) | -   | 13,190.00   |
|     |   | 2001             | H-P Softail motorcycle (fair condition)      | -   | 6,190.00  |
| 26. | Boats, motors, and accessories.   | X                |  |   |   |
| 27. | Aircraft and accessories.   | X                |  |   |   |
| 28. | Office equipment, furnishings, and supplies.  | X                |  |   |   |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                |  |   |   |
| 30. | Inventory.  | X                |  |   |   |
| 31. | Animals.  | X                |  |   |   |
| 32. | Crops - growing or harvested. Give particulars.   | X                |  |   |   |
| 33. | Farming equipment and implements.   | X                |  |   |   |
| 34. | Farm supplies, chemicals, and feed.   | X                |  |   |   |
| 35. | Other personal property of any kind not already listed. Itemize.  | Gene             | eral assortment of tools                     | -   | 200.00  |

Sub-Total >
(Total of this page)
Total >

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

19,580.00

66,991.00

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B6C (Official Form 6C) (12/07)

| In re | Mitchell R Sinclair |        |    | Case No. | 09-24077 |  |
|-------|---------------------|--------|----|----------|----------|--|
| _     |                     |        | _, |          |          |  |
|       |                     | Debtor |    |          |          |  |

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: | ☐ Check if debtor claims a homestead exemption that exceed |
|---|--|
| (Check one box)   | \$136,875.   |

■ 11 U.S.C. §522(b)(2)
□ 11 U.S.C. §522(b)(3)

| Description of Property   | Specify Law Providing<br>Each Exemption                  | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption |
|---|--|----------------------------------|---|
| Real Property<br>621 Clark Ave.<br>Jeannette, PA  | 11 U.S.C. § 522(d)(1)                                    | 14,181.00                        | 37,000.00   |
| FMV based on 2005 appraisal   |  |                                  |   |
| Cash on Hand cash   | 11 U.S.C. § 522(d)(5)                                    | 100.00                           | 100.00  |
| <u>Checking, Savings, or Other Financial Accounts, C</u><br>PNC Bank ( checking account )               | <u>Sertificates of Deposit</u><br>11 U.S.C. § 522(d)(5)  | 400.00                           | 400.00  |
| Household Goods and Furnishings<br>general assortment of household goods &<br>furnishings               | 11 U.S.C. § 522(d)(3)                                    | 3,000.00                         | 3,000.00  |
| Wearing Apparel general assortment of clothing  | 11 U.S.C. § 522(d)(5)                                    | 500.00                           | 500.00  |
| Firearms and Sports, Photographic and Other Hob fishing equipment                                       | <u>by Equipment</u><br>11 U.S.C. § 522(d)(5)             | 1,000.00                         | 1,000.00  |
| Interests in IRA, ERISA, Keogh, or Other Pension of PNC Carpenters Savings & Annuity Fund               | or <u>Profit Sharing Plans</u><br>11 U.S.C. § 522(d)(12) | 9,000.00                         | 9,000.00  |
| Carpenters Combined Funds ( pension )   | 11 U.S.C. § 522(d)(12)                                   | 33,411.00                        | 33,411.00   |
| Automobiles, Trucks, Trailers, and Other Vehicles 2006 Chevy Silverado ( 40,000 miles, good condition ) | 11 U.S.C. § 522(d)(5)                                    | 0.00                             | 13,190.00   |
| 2001 H-P Softail motorcycle (fair condition)  | 11 U.S.C. § 522(d)(2)<br>11 U.S.C. § 522(d)(5)           | 3,225.00<br>2,965.00             | 6,190.00  |
| Other Personal Property of Any Kind Not Already I<br>General assortment of tools                        | <u>_isted</u><br>11 U.S.C. § 522(d)(5)                   | 200.00                           | 200.00  |

| Total: 67.982.00 103.991.0 | 10 |
|----------------------------|----|

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B6D (Official Form 6D) (12/07)

| In re | Mitchell R Sinclair |        |    | Case No | 09-24077 |  |
|-------|---------------------|--------|----|---------|----------|--|
| -     |                     | D-1-4  | _, |         |          |  |
|       |                     | Debtor |    |         |          |  |

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

|  | _               | _                      |  | _           |      | ,         |  |                                 |
|--|-----------------|------------------------|--|-------------|------|-----------|--|---------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | Hu<br>H<br>W<br>J<br>C | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN | CONTINGEN   | LIQU | I S P U T | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
| Account No. 1969419273   |                 |                        | 01/2004  | Т           | E    |           |  |                                 |
| Chase Manhattan Mtge.<br>PO Box 24696<br>Columbus, OH 43224  |                 | -                      | First Mortgage 621 Clark Ave. Jeannette, PA FMV based on 2005 appraisal Value \$ 37,000.00   |             | D    |           | 22,819.00  | 0.00                            |
| Account No. 5000020014   |                 |                        | 11/2005  |             |      |           |  |                                 |
| HSBC Bank<br>PO Box 5253<br>Carol Stream, IL 60197   |                 | -                      | Auto 2006 Chevy Silverado ( 40,000 miles, good condition )   |             |      |           |  |                                 |
|  |                 |                        | Value \$ 13,190.00   |             |      | Ш         | 13,219.00  | 29.00                           |
| Account No.  |                 |                        | Value \$   |             |      |           |  |                                 |
| Account No.  |                 |                        |  |             |      |           |  |                                 |
|  |                 |                        | Value \$   |             |      |           |  |                                 |
| continuation sheets attached   |                 |                        | (Total of t  | Subt<br>his |      |           | 36,038.00  | 29.00                           |
| Total (Report on Summary of Schedules)   |                 |                        |  |             |      |           |  | 29.00                           |

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B6E (Official Form 6E) (12/07)

| 09-24077 |
|----------|
|          |
|          |

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total

continuation sheets attached

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

| In re | Mitchell R Sinclair |    | Case No | 09-24077 |
|-------|---------------------|----|---------|----------|
|       | Debtor              | ., |         |          |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,   | С               | Hu          | sband, Wife, Joint, or Community  | С         | U                | D      |                 |
|--|-----------------|-------------|---|-----------|------------------|--------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)               | C O D E B T O R | H<br>W<br>J | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | LLQDL            | S<br>P | AMOUNT OF CLAIM |
| Account No. 71173200570653   |                 |             | 09/2008   | T         | D<br>A<br>T<br>E |        |                 |
| Beneficial<br>PO Box 1547<br>Chesapeake, VA 23327  |                 | -           | collection account/Midland Funding  |           | D                |        | 7,464.00        |
| Account No. <b>5049-9480-0021-5212</b>   | $\dashv$        |             | 2008  |           | $\vdash$         |        |                 |
| CBCS<br>PO Box 165025<br>Columbus, OH 43216-5025   |                 | -           | collection account/ Sears Private Label   |           |                  |        | 2,316.50        |
| Account No. 67330658-0303443  Citifinancial 605 Munn Rd. Po Box 70918 Charlotte, NC 28272-0918 |                 | -           | 2008 misc household purchase/ groceries/utilities   |           |                  |        | 5,907.42        |
| Account No. <b>607209121531</b>  | +               |             | 03/2005   |           |                  |        | 0,001112        |
| Citifinancial PO Box 499 Hanover, MD 21076   |                 | -           | personal loan   |           |                  |        | 5,585.00        |
| _3 continuation sheets attached  |                 | •           | (Total of   | Subt      |                  |        | 21,272.92       |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Mitchell R Sinclair |        | Case No. | 09-24077 |  |
|-------|---------------------|--------|----------|----------|--|
| _     |                     | Debtor |          |          |  |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| TE CLAIM WAS INCURRED AND DERATION FOR CLAIM. IF CLAIM UBJECT TO SETOFF, SO STATE.  CCOUNT/ Chase Bank  CCOUNT/ Citibank Universal   |
|--|
| TE CLAIM WAS INCURRED AND DERATION FOR CLAIM. IF CLAIM JBJECT TO SETOFF, SO STATE.  CCOUNT/ Chase Bank  CCOUNT/ Chase Bank  3,103.48 |
| ccount/ Chase Bank  T T E D  3,103.48  |
| ccount/ Chase Bank   |
| 3,103.48   |
|  |
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| ccount/ Citibank Universal   |
| ccount/ Citibank Universal   |
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|  |
| 4,990.00   |
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| ccount/ Discover Card  |
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| 2,779.81   |
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| ccount/ First National Bank of   |
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|  |
| 2,130.00   |
|  |
| ccount/ HSBC   |
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|  |
|  |
|  |
| 7.464.04   |
| 7,464.04   |
| 7,464.04  Subtotal 20,467.33   |
|  |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Mitchell R Sinclair |        |   | Case No | 09-24077 |  |
|-------|---------------------|--------|---|---------|----------|--|
| _     |                     | Debtor | , |         |          |  |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)       | CODEBTOR | Hu:<br>H W<br>J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLLQULDAT  | D I S P U T E D | AMOUNT OF CLAIM |
|---|----------|-------------------|---|------------|-------------|-----------------|-----------------|
| Account No. 71750XXXX   |          |                   | 06/2008 collection account/ Seton Emergency   | Ť          | T<br>E<br>D |                 |                 |
| NCO Financial Systems Inc.<br>507 Prudential Rd.<br>Horsham, PA 19044                                   |          | -                 | Physicians  |            |             |                 | 200.00          |
| Account No. 4121-7416-2040-0957   | T        |                   | 2008  |            |             |                 |                 |
| Northland Group<br>PO Box 390846<br>Minneapolis, MN 55439   |          | -                 | collection account/ Capital One   |            |             |                 | 1,683.00        |
| Account No. 7981924390326916  | T        |                   | 03/2004   |            |             |                 |                 |
| Resurgent<br>Capital Services L.P.<br>PO Box 5025<br>Sioux Falls, SD 57117-5025                         |          | -                 | collection account/ Lowes   |            |             |                 | 949.02          |
| Account No. <b>EH516/552P08859</b>  |          | $\vdash$          | 2008  |            |             | L               | 949.02          |
| Shapiro Law Office, P.C.<br>33 rock Hill Road<br>Suite 150<br>PO Box 1050<br>Bala Cynwyd, PA 19004-5050 | -        | -                 | collection account/ Erin Capital Management/<br>Citibank Platinum Select # 5424180514032413   |            |             |                 | 3,310.07        |
| Account No. <b>5006114</b>  | ╁        | $\vdash$          | 03/2000   | $\vdash$   |             | $\vdash$        | 3,310.07        |
| Sunoco/CBSD<br>PO Box 6497<br>Sioux Falls, SD 57117   | -        | -                 | fuel  |            |             |                 | 412.00          |
| Sheet no. 2 of 3 sheets attached to Schedule of   | _        |                   |   | Subi       |             |                 | 6,554.09        |
| Creditors Holding Unsecured Nonpriority Claims  |          |                   | (Total of t   | nis :      | pag         | (e)             | 1               |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Mitchell R Sinclair |        | Case No | 09-24077 |  |
|-------|---------------------|--------|---------|----------|--|
| _     |                     | Debtor |         |          |  |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |           |         |   |            | _         |          |                 |
|--|-----------|---------|---|------------|-----------|----------|-----------------|
| CREDITOR'S NAME,   | CO        |         | sband, Wife, Joint, or Community  |            | U<br>N    | D        |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODE BT OR | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | LIQUIDATE | DISPUTED | AMOUNT OF CLAIM |
| Account No. 5431-4301-1037-5257  |           |         | 2008  | T          | E         |          |                 |
| Weinstein & Riley, P.S.<br>2001 Western Ave., Suite 400<br>Seattle, WA 98121     |           | -       | collection account/ Chase Bank  |            | D         |          |                 |
|  |           |         |   |            |           |          | 4,811.88        |
| Account No.  |           |         |   |            |           |          |                 |
|  |           |         |   |            |           |          |                 |
| Account No.  | l         |         |   |            |           |          |                 |
|  |           |         |   |            |           |          |                 |
|  |           |         |   |            |           |          |                 |
|  |           |         |   |            |           |          |                 |
| Account No.  |           |         |   | ╁          |           |          |                 |
| 1.00 mm 1.00   | l         |         |   |            |           |          |                 |
|  |           |         |   |            |           |          |                 |
|  |           |         |   |            |           |          |                 |
|  |           |         |   |            |           |          |                 |
|  |           |         |   | ot         |           |          |                 |
| Account No.  | l         |         |   |            |           |          |                 |
|  |           |         |   |            |           |          |                 |
|  |           |         |   |            |           |          |                 |
|  |           |         |   |            |           |          |                 |
|  |           |         |   |            |           |          |                 |
| Sheet no. <b>3</b> of <b>3</b> sheets attached to Schedule of                    | _         |         |   | Sub        | tota      | ıl       |                 |
| Creditors Holding Unsecured Nonpriority Claims                                   |           |         | (Total of t   | his        | pag       | ge)      | 4,811.88        |
|  |           |         |   |            | Γota      |          | F0 400 CC       |
|  |           |         | (Report on Summary of So  | hec        | dule      | es)      | 53,106.22       |

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B6G (Official Form 6G) (12/07)

| In re | Mitchell R Sinclair |        | Case No | 09-24077 |  |
|-------|---------------------|--------|---------|----------|--|
| _     |                     | Debtor | ,       |          |  |

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 09-24077-CMB Doc 11 Filed 06/26/09 Entered 06/26/09 06:09:37 Desc Main Document Page 15 of 39

B6H (Official Form 6H) (12/07)

| In re | Mitchell R Sinclair |              | Case No | 09-24077 |  |
|-------|---------------------|--------------|---------|----------|--|
| _     |                     | <del>,</del> | ,       |          |  |
|       |                     | Debtor       |         |          |  |

## **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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**B6I (Official Form 6I) (12/07)** 

| In re | Mitchell R Sinclair | Case | e No. | 09-24077 |  |
|-------|---------------------|------|-------|----------|--|
|       | Debtor(s)           |      |       | _        |  |

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status:                  | DEPENDENTS OF D   | EBTOR AND SPOUSE          |                         |
|---|---|---------------------------|-------------------------|
| Single                                    | RELATIONSHIP(S): None.  | AGE(S):                   |                         |
| Employment:                               | DEBTOR  | SPOUSE                    |                         |
| Occupation                                | carpenter   |                           |                         |
| Name of Employer                          | Schoff Construction & Design Inc.                                 |                           |                         |
| How long employed                         | 9 yrs.  |                           |                         |
| Address of Employer                       | 217 Fifth Street<br>Irwin, PA 15642                               |                           |                         |
|   | ge or projected monthly income at time case filed)                | DEBTOR                    | SPOUSE                  |
|   | , and commissions (Prorate if not paid monthly)                   | \$ <u>4,693.87</u>        | \$ <b>N/A</b>           |
| 2. Estimate monthly overtime              |   | \$0.00                    | \$ <b>N/A</b>           |
| 3. SUBTOTAL                               |   | \$4,693.87_               | \$                      |
| 4. LESS PAYROLL DEDUCT                    |   |                           |                         |
| a. Payroll taxes and socia                | l security  | \$ 1,278.98               | \$ <u>N/A</u>           |
| b. Insurance                              |   | \$ 0.00                   | \$ N/A                  |
| c. Union dues                             | Lord Dion   | \$ 140.83                 | \$ N/A<br>\$ N/A        |
| d. Other (Specify):                       | Legal Plan  | \$ <u>8.67</u><br>\$ 0.00 | \$ <u>N/A</u><br>\$ N/A |
| -   |   | _                         | <u> </u>                |
| 5. SUBTOTAL OF PAYROLL                    | DEDUCTIONS  | \$1,428.48                | \$N/A                   |
| 6. TOTAL NET MONTHLY T                    | AKE HOME PAY  | \$3,265.39                | \$ <b>N/A</b>           |
| 7. Regular income from operat             | ion of business or profession or farm (Attach detailed statemen   |                           | \$ <b>N/A</b>           |
| 8. Income from real property              |   | \$                        | \$ <b>N/A</b>           |
| 9. Interest and dividends                 |   | \$                        | \$ <b>N/A</b>           |
| dependents listed above                   | upport payments payable to the debtor for the debtor's use or the | hat of \$ <b>0.00</b>     | \$ <b>N/A</b>           |
| 11. Social security or governm (Specify): |   | \$ 0.00                   | \$ <b>N/A</b>           |
| (Specify).                                |   | \$ 0.00                   | \$ N/A                  |
| 12. Pension or retirement incom           | ne  | \$ 0.00                   | \$ <b>N/A</b>           |
| 13. Other monthly income                  |   |                           |                         |
| (Specify):                                |   | \$ <u> </u>               | \$ <b>N/A</b>           |
|   |   | _ \$\$                    | \$ <u>N/A</u>           |
| 14. SUBTOTAL OF LINES 7                   | THROUGH 13  | \$0.00_                   | \$ <b>N/</b> A          |
| 15. AVERAGE MONTHLY I                     | NCOME (Add amounts shown on lines 6 and 14)                       | \$3,265.39_               | \$ <b>N/A</b>           |
| 16. COMBINED AVERAGE N                    | MONTHLY INCOME: (Combine column totals from line 15)              | \$                        | 3,265.39                |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

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B6J (Official Form 6J) (12/07)

| In re | Mitchell R Sinclair |           | Case No. | 09-24077 |
|-------|---------------------|-----------|----------|----------|
|       |                     | Debtor(s) |          |          |

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

|  |               | - ()            |
|--|---------------|-----------------|
| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22 | The averag    |                 |
| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."  | ete a separat | e schedule of   |
| 1. Rent or home mortgage payment (include lot rented for mobile home)  | \$            | 0.00            |
| a. Are real estate taxes included? Yes X No  | T             |                 |
| b. Is property insurance included? Yes X No No   |               |                 |
| 2. Utilities: a. Electricity and heating fuel  | \$            | 211.00          |
| b. Water and sewer   | \$            | 70.00           |
| c. Telephone   | \$            | 75.00           |
| d. Other See Detailed Expense Attachment   | \$            | 97.00           |
| 3. Home maintenance (repairs and upkeep)   | \$            | 0.00            |
| 4. Food  | \$            | 200.00          |
| 5. Clothing  | \$            | 10.00           |
| 6. Laundry and dry cleaning  | \$            | 10.00           |
| 7. Medical and dental expenses   | \$            | 50.00           |
| 8. Transportation (not including car payments)   | \$            | 300.00          |
| <ol> <li>Recreation, clubs and entertainment, newspapers, magazines, etc.</li> <li>Charitable contributions</li> </ol>   | \$            | 100.00<br>50.00 |
|  | <b>y</b>      | 50.00           |
| 11. Insurance (not deducted from wages or included in home mortgage payments)  a. Homeowner's or renter's  | \$            | 0.00            |
| b. Life  | ф ——          | 0.00            |
| c. Health  | \$            | 110.00          |
| d. Auto  | \$            | 105.00          |
| e. Other motorcycle insurance  | \$ ——         | 128.00          |
| 12. Taxes (not deducted from wages or included in home mortgage payments)  | Ψ             | 120.00          |
| (Specify) Local wage taxes   | \$            | 33.00           |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the   | Ψ             |                 |
| plan)  |               |                 |
| a. Auto  | \$            | 0.00            |
| b. Other   | \$            | 0.00            |
| c. Other   | \$            | 0.00            |
| 14. Alimony, maintenance, and support paid to others   | \$            | 0.00            |
| 15. Payments for support of additional dependents not living at your home  | \$            | 0.00            |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)   | \$            | 0.00            |
| 17. Other See Detailed Expense Attachment  | \$            | 542.00          |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,   | \$            | 2,091.00        |
| if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)  | Φ             | 2,031.00        |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year  |               |                 |
| following the filing of this document:   |               |                 |
| tono ning the ming of this document.   |               |                 |
| 20. STATEMENT OF MONTHLY NET INCOME  | •             |                 |
| A  | \$            | 3,265.39        |
| <ul><li>a. Average monthly income from Line 15 of Schedule 1</li><li>b. Average monthly expenses from Line 18 above</li></ul>  | \$            | 2,091.00        |
| c. Monthly net income (a. minus b.)  | \$            | 1,174.39        |
| c. Monthly not moone (a. mindo o.)   | Ψ             | 1,11 -1.00      |

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B6J (Official Form 6J) (12/07)

In re Mitchell R Sinclair Case No. 09-24077

Debtor(s)

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

# **Other Utility Expenditures:**

| _cable tv                        |          | 57.00 |
|----------------------------------|----------|-------|
| cell phone                       | <u> </u> | 40.00 |
| Total Other Utility Expenditures | \$       | 97.00 |

# **Other Expenditures:**

| newspapers & magazines       | \$       | 22.00  |
|------------------------------|----------|--------|
| personal grooming & haircuts | \$       | 50.00  |
| auto repairs & maintenance   | \$       | 80.00  |
| work tools                   | \$       | 40.00  |
| tobacco                      | <u> </u> | 240.00 |
| Union Dues                   | <u> </u> | 20.00  |
| Work boots/uniforms          | <u> </u> | 40.00  |
| parking/tolls                | \$       | 50.00  |
| Total Other Expenditures     | \$       | 542.00 |

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B6 Declaration (Official Form 6 - Declaration). (12/07)

# **United States Bankruptcy Court** Western District of Pennsylvania

| In re | Mitchell R Sinclair |           | Case No. | 09-24077 |
|-------|---------------------|-----------|----------|----------|
|       |                     | Debtor(s) | Chapter  | 13       |

# DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

| Date <b>June 25, 2009</b>  | Signature:  | /s/ Mitchell R Sinclair  |
|--|---|--|
|  |   | Debtor   |
| Date   | Signature:  |  |
|  |   | (Joint Debtor, if any)   |
|  | [If joint of  | ease, both spouses must sign.]   |
| DECLARATION UNDER PENALTY OF PLANTS I, the [the president or other officer or an authen partnership] of the [corporation or partnership]   | thorized agent of the corp  | •  |
| I, the [the president or other officer or an authe partnership] of the [corporation or partnership ave read the foregoing summary and schedules, considery are true and correct to the best of my knowledge, | thorized agent of the corp<br>p] named as a debtor in this<br>sting of sheets [total                              | poration or a member or an authorized agent of his case, declare under penalty of perjury that I |
| I, the [the president or other officer or an au  | thorized agent of the corp<br>p] named as a debtor in this<br>isting of sheets [total<br>information, and belief. | poration or a member or an authorized agent of his case, declare under penalty of perjury that I |

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B7 (Official Form 7) (12/07)

# **United States Bankruptcy Court** Western District of Pennsylvania

| In re | Mitchell R Sinclair |           | Case No. | 09-24077 |
|-------|---------------------|-----------|----------|----------|
|       |                     | Debtor(s) | Chapter  | 13       |

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

## 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| \$23,803.32 | 2009 YTD Employment Income - (Schoff Construction)    |
|-------------|---|
| \$35,793.94 | 2008 W-2 Wage & Tax Statement ( Schoff Construction ) |
| \$56,877.00 | 2007 W-2 Wage & Tax Statement ( Schoff Construction ) |

COLIDCE

AMOUNT

### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR Chase Manhattan Mtge. PO Box 24696 Columbus, OH 43224 | DATES OF PAYMENTS <b>Monthly (\$317.00)</b> | AMOUNT PAID<br><b>\$951.00</b> | AMOUNT STILL<br>OWING<br>\$22,819.00 |
|--|---|--------------------------------|--------------------------------------|
| HSBC Bank<br>PO Box 5253<br>Carol Stream, IL 60197                                 | Monthly (\$468)                             | \$1,404.00                     | \$13,219.00                          |

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND
RELATIONSHIP TO DEBTOR
DATE OF PAYMENT
AMOUNT PAID
OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER
NATURE OF PROCEEDING
Erin Capital Management, civil

LLC vs Mitchell R. Sinclair

COURT OR AGENCY
AND LOCATION
Westmoreland County Court of Common Pleas
on 12/11/08

No: 14365 of 2008

2

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None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF REPOSSESSION,

NAME AND ADDRESS OF CREDITOR OR SELLER

FORECLOSURE SALE, TRANSFER OR RETURN DESCRIPTION AND VALUE OF PROPERTY

## 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF CUSTODIAN OF COURT CASE TITLE & NUMBER DATE OF ORDER DESCRIPTION AND VALUE OF

3

PROPERTY

## 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Anicia M. Ogonosky-Gau 414 S. Maple Avenue Greensburg, PA 15601 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 3/9/09 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

4

# 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

# 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None List al

List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF

PROPERTY

LOCATION OF PROPERTY

5

#### 15. Prior address of debtor

NAME AND ADDRESS OF OWNER

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

**BEGINNING AND** 

6

**ENDING DATES** 

NAME None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME **ADDRESS** 

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

## NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

**ADDRESS** 

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME **ADDRESS** 

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

7

(Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE NAME AND ADDRESS TITLE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the

commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year

immediately preceding the commencement of this case.

DATE OF TERMINATION NAME AND ADDRESS TITLE

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the

commencement of this case.

NAME & ADDRESS AMOUNT OF MONEY OF RECIPIENT, DATE AND PURPOSE OR DESCRIPTION AND RELATIONSHIP TO DEBTOR OF WITHDRAWAL VALUE OF PROPERTY

24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated

group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

NAME OF PENSION FUND

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

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Best Case Bankruptcy

# DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | June 25, 2009 | Signature | /s/ Mitchell R Sinclair    |
|------|---------------|-----------|----------------------------|
|      |               |           | Mitchell R Sinclair Debtor |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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# **United States Bankruptcy Court**

|             |          | _        | -        |
|-------------|----------|----------|----------|
| Western     | District | of Ponn  | cylyania |
| VV CSICI II | District | or r cim | syrvania |

| In | re Mitchell R Sinclair   | Case No.          | 09-24077                             |
|----|--|-------------------|--------------------------------------|
|    | Debtor(s)  | Chapter           | 13                                   |
|    | DISCLOSURE OF COMPENSATION OF ATTORN   | EY FOR DE         | CBTOR(S)                             |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the compensation paid to me within one year before the filing of the petition in bankruptcy, or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy.   | agreed to be pai  | d to me, for services rendered or to |
|    | For legal services, I have agreed to accept  | \$                | 3,100.00                             |
|    | Prior to the filing of this statement I have received  | \$                | 925.00                               |
|    | Balance Due  | \$                | 2,175.00                             |
| 2. | The source of the compensation paid to me was:   |                   |                                      |
|    | ■ Debtor □ Other (specify):  |                   |                                      |
| 3. | The source of compensation to be paid to me is:  |                   |                                      |
|    | ■ Debtor □ Other (specify):  |                   |                                      |
| 4. | ■ I have not agreed to share the above-disclosed compensation with any other person unle   | ess they are meml | pers and associates of my law firm.  |
|    | ☐ I have agreed to share the above-disclosed compensation with a person or persons who copy of the agreement, together with a list of the names of the people sharing in the con   |                   |                                      |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of  | the bankruptcy c  | ase, including:                      |
|    | <ul><li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determing.</li><li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may c. Representation of the debtor at the meeting of creditors and confirmation hearing, and an d. [Other provisions as needed]</li></ul> | y be required;    |                                      |
| 6. | By agreement with the debtor(s), the above-disclosed fee does not include the following ser  Client has agreed that the parties shall follow Local Rules as they per  "No-Look fee." However, time & expense records shall be maintained   | tain to additio   |                                      |

Client has agreed that the parties shall follow Local Rules as they pertain to additional compensation above the "No-Look fee." However, time & expense records shall be maintained and billed at \$200.00 per hour from the initial meeting with client. Additional compensation shall be paid in accordance with the Court's Local Rules. Time will be kept on the following items and billed at the firm's hourly rate of \$200.00 per hour:

Correspondence, communications via phone, mail and email with clients, creditors and third parties; review of all documents pertaining to the case received via mail, fax and email; review of all claims; representation of debtors in all hearings, including any concilliation conferences, dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding, Complaints to Determine Secured Status, Objection to Claims, Motions including Postpetition Financing, Payoffs, Motions/Complaints to Sell Property, Motions to Employ Professionals, Responses to Motions for Relief from Stay, Motions filed by Creditors, Responses to Motions to Dismiss, all discharge/dismissal, Responses/Briefs related to confirmation of Plan and any miscellaneous Motions or Hearings.

Debtor shall also be billed above the "no-look" fee for postage, copies and parking associated with their case or attendance at hearings.

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| In re | Mitchell R Sinclair | Case No. | 09-24077 |
|-------|---------------------|----------|----------|
|       | Debtor(s)           | -        |          |

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

# CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: June 25, 2009 /s/ Anicia M. Ogonosky-Gau

Anicia M. Ogonosky-Gau 91684 Anicia M. Ogonosky-Gau 414 S. Maple Avenue Greensburg, PA 15601

724-836-0540 Fax: 724-836-0541 amogonosky@yahoo.com

# UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF PENNSYLVANIA

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

# 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

## Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments

B 201 (12/08) Page 2

over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

## **Chapter 11:** Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

# **Chapter 12:** Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

## **Certificate of Attorney**

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

| Anicia M. Ogonosky-Gau 91684                   | X /s/ Anicia M. Ogonosky-Gau       | June 25, 2009 |
|--|------------------------------------|---------------|
| Printed Name of Attorney                       | Signature of Attorney              | Date          |
| Address:                                       |                                    |               |
| 414 S. Maple Avenue                            |                                    |               |
| Greensburg, PA 15601                           |                                    |               |
| 724-836-0540<br>amogonosky@yahoo.com           |                                    |               |
|  | Certificate of Debtor              |               |
| I (We), the debtor(s), affirm that I (we) have | re received and read this notice.  |               |
| Mitchell R Sinclair                            | X /s/ Mitchell R Sinclair          | June 25, 2009 |
| Printed Name(s) of Debtor(s)                   | Signature of Debtor                | Date          |
| Case No. (if known) <b>09-24077</b>            | X                                  |               |
|  | Signature of Joint Debtor (if any) | Date          |
|  |                                    |               |
|  |                                    |               |

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# United States Bankruptcy Court Western District of Pennsylvania

| In re  | Mitchell R Sinclair                       |   | Case No.         | 09-24077              |  |
|--------|---|---|------------------|-----------------------|--|
|        |   | Debtor(s)                                   | Chapter          | 13                    |  |
|        | VERIFICA                                  | ATION OF CREDITOR M                         | IATRIX           |                       |  |
| Γhe ab | ove-named Debtor hereby verifies that the | attached list of creditors is true and cor- | rect to the best | of his/her knowledge. |  |

/s/ Mitchell R Sinclair Mitchell R Sinclair Signature of Debtor

Date: June 25, 2009

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**B22C** (Official Form 22C) (Chapter 13) (01/08)

| In re   | Mitche | II R Sinclair | According to the calculations required by this statement:           |
|---------|--------|---------------|---|
|         |        | Debtor(s)     | ☐ The applicable commitment period is 3 years.                      |
| Case Nu | ımber: | 09-24077      | <b>■</b> The applicable commitment period is 5 years.               |
|         |        | (If known)    | ■ Disposable income is determined under § 1325(b)(3).               |
|         |        |               | ☐ Disposable income is not determined under § 1325(b)(3).           |
|         |        |               | (Check the boxes as directed in Lines 17 and 23 of this statement.) |

# CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

| lay con | plete one statement only.  |          |                 |              |
|---------|--|----------|-----------------|--------------|
|         | Part I. REPORT OF INCOME   |          |                 |              |
|         | Marital/filing status. Check the box that applies and complete the balance of this part of this state  | ment     | as directed.    |              |
| 1       | a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.   |          |                 |              |
|         | b. $\square$ Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income")  | me'')    | for Lines 2-10. |              |
|         | All figures must reflect average monthly income received from all sources, derived during the six  | Column A |                 | Column B     |
|         | calendar months prior to filing the bankruptcy case, ending on the last day of the month before<br>the filing. If the amount of monthly income varied during the six months, you must divide the     |          | Debtor's        | Spouse's     |
|         | six-month total by six, and enter the result on the appropriate line.  | Income   |                 | Income       |
| 2       | Gross wages, salary, tips, bonuses, overtime, commissions.   | \$       | 4,533.64        | \$           |
|         | <b>Income from the operation of a business, profession, or farm.</b> Subtract Line b from Line a and   | -        | 1,000101        | <del>-</del> |
|         | enter the difference in the appropriate column(s) of Line 3. If you operate more than one business,  |          |                 |              |
|         | profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. <b>Do not include any part of the business expenses entered on Line b as</b> |          |                 |              |
| 3       | a deduction in Part IV.  |          |                 |              |
| 3       | Debtor Spouse  |          |                 |              |
|         | a. Gross receipts \$ 0.00 \$   |          |                 |              |
|         | b. Ordinary and necessary business expenses \$ 0.00 \$   |          |                 |              |
|         | c. Business income Subtract Line b from Line a   | \$       | 0.00            | \$           |
|         | Rents and other real property income. Subtract Line b from Line a and enter the difference in  |          |                 |              |
|         | the appropriate column(s) of Line 4. Do not enter a number less than zero. <b>Do not include any</b> part of the operating expenses entered on Line b as a deduction in Part IV.                     |          |                 |              |
| 4       | Debtor Spouse  |          |                 |              |
| -       | a. Gross receipts \$ 0.00 \$   |          |                 |              |
|         | b. Ordinary and necessary operating expenses \$ 0.00 \$  |          |                 |              |
|         | c. Rent and other real property income Subtract Line b from Line a   | \$       | 0.00            | \$           |
| 5       | Interest, dividends, and royalties.  | \$       | 0.00            | \$           |
| 6       | Pension and retirement income.   | \$       | 0.00            | \$           |
|         | Any amounts paid by another person or entity, on a regular basis, for the household  |          |                 |              |
| 7       | expenses of the debtor or the debtor's dependents, including child support paid for that   |          |                 |              |
|         | <b>purpose.</b> Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse.  | \$       | 0.00            | ¢            |
|         | Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8.  | φ        | 0.00            | φ            |
|         | However, if you contend that unemployment compensation received by you or your spouse was a  |          |                 |              |
| 0       | benefit under the Social Security Act, do not list the amount of such compensation in Column A   |          |                 |              |
| 8       | or B, but instead state the amount in the space below:   |          |                 |              |
|         | Unemployment compensation claimed to   |          |                 |              |
|         | be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$  | \$       | 0.00            | \$           |

| 9  | Income from all other sources. Specify source on a separate page. Total and enter on Line 9. I maintenance payments paid by your spouse, b separate maintenance. Do not include any ben payments received as a victim of a war crime, cri   | Oo not include alimony out include all other pate its received under the   | or separate yments of alimon Social Security A   | y or  |   |             |           |
|----|---|--|--|---|---|-------------|-----------|
|    | international or domestic terrorism.  | Debtor   | Spouse   |   |   |             |           |
|    |   | \$   | \$   |   |   |             |           |
|    |   | \$   | \$   |   | \$ 0.0  | 0 \$        |           |
| 10 | <b>Subtotal.</b> Add Lines 2 thru 9 in Column A, and, in Column B. Enter the total(s).  |  |  |   | \$ 4,533.6  | <b>4</b> \$ |           |
| 11 | <b>Total.</b> If Column B has been completed, add Lin the total. If Column B has not been completed, or   |  |  |   | \$  |             | 4,533.64  |
|    | Part II. CALCULATIO   | ON OF § 1325(b)(4  | ) COMMITM  | IENT P  | ERIOD   |             |           |
| 12 | Enter the amount from Line 11   |  |  |   |   | \$          | 4,533.64  |
| 13 | Marital Adjustment. If you are married, but are calculation of the commitment period under § 13 enter on Line 13 the amount of the income listed the household expenses of you or your dependent income (such as payment of the spouse's tax liab debtor's dependents) and the amount of income on a separate page. If the conditions for entering a.  b. c.  | 325(b)(4) does not requal in Line 10, Column B and specify, in the libility or the spouse's supdevoted to each purpose | tre inclusion of the<br>that was NOT paid<br>nes below, the base<br>port of persons of<br>the increasery, list | e income on the income of the | f your spouse,<br>alar basis for<br>ading this<br>e debtor or the |             |           |
|    | Total and enter on Line 13  | •  |  |   |   | \$          | 0.00      |
| 14 | Subtract Line 13 from Line 12 and enter the r   | esult.   |  |   |   | \$          | 4,533.64  |
| 15 | Annualized current monthly income for § 132: enter the result.  | 5(b)(4). Multiply the a  | mount from Line 1  | 14 by the n   | umber 12 and  | \$          | 54,403.68 |
| 16 | Applicable median family income. Enter the me information is available by family size at <a "<="" box="" for="" heck="" href="https://www.u&lt;/a&gt; a. Enter debtor's state of residence:&lt;/td&gt;&lt;td&gt;ssdoj.gov/ust/ or from th&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;kruptcy co&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;\$&lt;/td&gt;&lt;td&gt;,&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;Application of § 1325(b)(4). Check the application&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;u&gt;                                     &lt;/u&gt;&lt;/td&gt;&lt;td&gt;\$&lt;/td&gt;&lt;td&gt;44,688.00&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;17&lt;/td&gt;&lt;td&gt;☐ The amount on Line 15 is less than the amount op of page 1 of this statement and continue of the top of the&lt;/td&gt;&lt;td&gt;ount on Line 16. Check with this statement.  amount on Line 16. C&lt;/td&gt;&lt;td&gt;the box for " td="" the=""><td>••</td><td>·</td><td></td><td>·</td></a> | ••   | ·  |   | ·   |             |           |
|    | Part III. APPLICATION OF §  | 1325(b)(3) FOR DET   | ERMINING DIS   | POSABL  | E INCOME  | •           |           |
| 18 | Enter the amount from Line 11.  |  |  |   |   | \$          | 4,533.64  |
| 19 | Marital Adjustment. If you are married, but are any income listed in Line 10, Column B that was debtor or the debtor's dependents. Specify in the payment of the spouse's tax liability or the spous dependents) and the amount of income devoted t separate page. If the conditions for entering this a.    a.     b.  | s NOT paid on a regula<br>lines below the basis for<br>e's support of persons of<br>to each purpose. If nece           | r basis for the house<br>or excluding the Co<br>other than the debte<br>ssary, list addition                   | sehold exp<br>olumn B in<br>or or the d   | enses of the<br>ncome(such as<br>ebtor's                          |             |           |
|    | c.  | \$   |  |   |   |             |           |
|    | Total and enter on Line 19.   |  |  |   |   | \$          | 0.00      |
| 20 | Current monthly income for § 1325(b)(3). Sub  | otract Line 19 from Line   | e 18 and enter the r   | result.   |   | <b>¢</b>    | A 533 6A  |

| 21  |  | alized current monthly inc  | ome for § 1325(b)(3). I   | Multip                      | oly the a                        | mount from Line 2                         | 0 by the number 12 and                             | \$      | 54 402 69 |
|-----|--|---|---|-----------------------------|----------------------------------|---|--|---------|-----------|
| 22  | Applicable median family income. Enter the amount from Line 16.  |   |   |                             |                                  | \$  | 54,403.68<br>44,688.00                             |         |           |
|     | Appli  | cation of § 1325(b)(3). Che   | ck the applicable box a   | nd pro                      | oceed as                         | directed.                                 |  | φ       | 44,000.00 |
| 23  |  | e amount on Line 21 is mo<br>25(b)(3)" at the top of page   |   |                             |                                  |   |  | nined u | nder §    |
|     |  | e amount on Line 21 is not 25(b)(3)" at the top of page   |   |                             |                                  |   |  |         |           |
|     |  | Part IV. Ca   | ALCULATION (  | OF I                        | DEDU                             | CTIONS FR                                 | OM INCOME  |         |           |
|     |  | Subpart A: D  | eductions under Sta   | ndar                        | ds of th                         | ne Internal Reve                          | nue Service (IRS)                                  |         |           |
| 24A | Enter applic   | nal Standards: food, appar<br>in Line 24A the "Total" ame<br>able household size. (This<br>aptcy court.)  | ount from IRS National  | Stand                       | lards for                        | Allowable Living                          | Expenses for the                                   | \$      | 517.00    |
| 24B | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B. |   |   |                             |                                  |   |  |         |           |
|     | Hous   | ehold members under 65 y  | ears of age   | Hou                         | sehold                           | members 65 years                          | of age or older                                    |         |           |
|     | a1.  | Allowance per member  | 60  |                             |                                  | ance per member                           | 144  |         |           |
|     | b1.  | Number of members   | 1   |                             |                                  | er of members                             | 0  |         |           |
|     | c1.  | Subtotal  | 60.00   | <u> </u>                    | Subtot                           |   | 0.00   | \$      | 60.00     |
| 25A | Utiliti  | <b>Standards: housing and u</b> es Standards; non-mortgage ble at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> o   | expenses for the applic   | able o                      | county a                         | nd household size.                        |  | \$      | 403.00    |
| 25B | Housi<br>availa<br>Month   | Standards: housing and ung and Utilities Standards; note at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> only Payments for any debts sult in Line 25B. Do not en | mortgage/rent expense for from the clerk of the becured by your home, a | or you<br>ankru<br>is state | ar count<br>optcy co<br>ed in Li | y and household si<br>urt); enter on Line | ze (this information is b the total of the Average |         |           |
|     | a. IRS Housing and Utilities Standards; mortgage/ren   |   |   |                             | \$                               | 662.00                                    |  |         |           |
|     | b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 \$ 317.00  |   |   |                             |                                  |   |  |         |           |
|     | c.   | Net mortgage/rental expen   |   |                             |                                  | Subtract Line b fr                        | -  | \$      | 345.00    |
| 26  | 25B d<br>Standa  | Standards: housing and u<br>oes not accurately compute<br>ards, enter any additional an<br>ation in the space below:  | the allowance to which  | you a                       | re entitl                        | ed under the IRS H                        | Iousing and Utilities                              |         |           |
|     |  |   |   |                             |                                  |   |  | \$      | 0.00      |

| Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your claim or working the public transportation expenses, enter on Line 27 Bthe *Public Transportation* amount from the IRS Local Standards: Transportation. (This amount is available at wawx_ustoi_gov/ust/ or from the clerk of the bankruptcy court).  Local Standards: transportation ownership/lease expense, (You may not claim an ownership/lease expense for more than two vehicles.) ■ 1 □ 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www_ustoi_gov/ust/) or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28.  Local Standards: Transportation Standards. Ownership/Costs \$ \$ 489.00    Local Standards: Transportation ownership/Costs \$ \$ \$ 226.20    Local Standards: Transportation ownership/Costs \$ \$ \$ 226.20    Local Standards: Transportation ownership/Costs \$ \$ \$ \$ 226.20    Local Standards: Transportation ownership/Costs \$ \$ \$ \$ \$ 226.20    Local Standards: Transportation ownership/Costs expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.ussloj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.  a IRS Transportation Standards, Ownership Costs \$ \$ \$ 0.00    Local Standards: Transportation Standards, Ownership Costs \$ \$ \$ 0.00    Local Standards: Transportation ownership/leas |     |  |   |          |          |
|---|-----|--|---|----------|----------|
| Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. ☐ 0  |     | expense allowance in this category regardless of whether you pay the   |   |          |          |
| If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation, If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolium Statistical Area or Census Region. (These amounts are available at www.usedia.gov/uss/ or from the clerk of the bankruptcy court.)  Local Standards: transportation, additional public transportation expenses, enter on Line 27B he "Public Transportation" and you contend that you are entitled to an additional deduction for your public transportation. (This amount is available at www.usedia.gov/uss/ or from the clerk of the bankruptcy court.)  Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles).  If a contract of the public transportation ownership/lease expense; Vehicle 1. Subtract Line b from Line and enter the result in Line 28. Do not enter an amount less than zero.  It is a stated in Line 47; subtract Line b from Line and enter the result in Line 28. Do not enter an amount less than zero.  Local Standards: transportation Standards. Ownership Costs  Average Monthly Payments for any debts secured by Vehicle 1. Subtract Line b from Line a.  Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usedia.gov/usef or from the clerk of the bankruptcy count; enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2. Subtract Line b from Line a.  Bit is Transportation Standards. Ownership Costs s S  | 27A | Check the number of vehicles for which you pay the operating expens  |   |          |          |
| for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you can public transportation. (This amount is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptey court.)  Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles). ■ 1   |     | If you checked 0, enter on Line 27A the "Public Transportation" amort Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the  | unt from IRS Local Standards: "Operating Costs" amount from IRS Local e applicable Metropolitan Statistical Area or | \$       | 235.00   |
| you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)      1   | 27B | for a vehicle and also use public transportation, and you contend that your public transportation expenses, enter on Line 27B the "Public Ti Standards: Transportation. (This amount is available at <a href="https://www.usdoj.gc">www.usdoj.gc</a>       | or  | 0.00     |          |
| Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero.    Average Monthly Payment for any debts secured by Vehicle   |     | you claim an ownership/lease expense. (You may not claim an owner  |   |          |          |
| Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 47  C. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a.  Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs \$ 0.00    Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47  Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a.  Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly primiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments, Enter the total monthly amount that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments, Enter the total monthly amount that you are required to pay pursuant to the o                       | 28  | Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 1, as stated in Li | court); enter in Line b the total of the Averag   | e        |          |
| b. I., as stated in Line 47 c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a.  Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership/Lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership/Lease expense; for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs \$ 0.00 Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 \$ 0.00 Collection of the Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as woluntary 401(k) contributions.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments                      |     |  | \$ 489.00   | 0        |          |
| Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs S O.00  Average Monthly Payment for any debts secured by Vehicle S 2, as stated in Line 47  C. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a.  Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as woluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on education that is a condition of employment and for education that is required for a phy                        |     | b. 1, as stated in Line 47   |   | )        |          |
| the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47  Net ownership/lease expense for Vehicle 2  Subtract Line b from Line a.  Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as woluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is availabl                        |     | c. Net ownership/lease expense for Vehicle 1   | Subtract Line b from Line a.  | \$       | 262.80   |
| Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2  Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on   | 29  | Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 2, as stated in Li | court); enter in Line b the total of the Averag   | е        |          |
| b.   2, as stated in Line 47   \$ Subtract Line b from Line a.  |     |  | \$ 0.00   | <u>)</u> |          |
| Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on  |     | b. 2, as stated in Line 47   |   | <u>)</u> |          |
| state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on  |     |  |   | \$       | 0.00     |
| deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on   | 30  | state, and local taxes, other than real estate and sales taxes, such as inc  | come taxes, self employment taxes, social   |          | 1,295.86 |
| life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on   | 31  | deductions that are required for your employment, such as mandatory  | retirement contributions, union dues, and   | \$       | 136.02   |
| Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on  | 32  | life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for   |   |          | 0.00     |
| Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on  | 33  | pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. <b>Do not</b>  |   |          | 0.00     |
| Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on   | 34  | the total average monthly amount that you actually expend for educated education that is required for a physically or mentally challenged deposition.  | ion that is a condition of employment and for   | r        | 0.00     |
|   | 35  |  |   |          | 0.00     |

|    | 1  |                   |          |
|----|--|-------------------|----------|
| 36 | Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on h care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by instor paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not includ payments for health insurance or health savings accounts listed in Line 39.   | urance            | 0.00     |
| 37 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - spagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your healt welfare or that of your dependents. <b>Do not include any amount previously deducted.</b>  | such as           | 60.00    |
| 38 | <b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 24 through 37.   | \$                | 3,314.68 |
|    | Subpart B: Additional Living Expense Deductions  | •                 | ,        |
|    | Note: Do not include any expenses that you have listed in Lines 24-3   | 7                 |          |
|    | Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expent the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents   | ses in            |          |
| 39 | a. Health Insurance \$ 110.00  |                   |          |
|    | b. Disability Insurance \$ 0.00  |                   |          |
|    | c. Health Savings Account \$ 0.00  |                   |          |
|    | Total and enter on Line 39   | \$                | 110.00   |
|    | <b>If you do not actually expend this total amount,</b> state your actual total average monthly expenditures in the below:   | ie space          |          |
|    | \$   |                   |          |
| 40 | Continued contributions to the care of household or family members. Enter the total average actual more expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chroill, or disabled member of your household or member of your immediate family who is unable to pay for successes. Do not include payments listed in Line 34.  | nically           | 0.00     |
| 41 | <b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act applicable federal law. The nature of these expenses is required to be kept confidential by the court.  |                   | 0.00     |
| 42 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS L Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide yo trustee with documentation of your actual expenses, and you must demonstrate that the additional amclaimed is reasonable and necessary.  | our case          | 0.00     |
| 43 | Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable a necessary and not already accounted for in the IRS Standards.    | у                 | 0.00     |
| 44 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothexpenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.go">www.usdoj.go</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. | othing<br>ov/ust/ | 19.00    |
| 45 | Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charital contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.  | ble               | 50.00    |
| 46 | Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.  | \$                | 179.00   |
|    |  | φ                 | 113.00   |

|    |  | Subpart C: Deductions for De   | ebt Payment   |  |    |                       |
|----|--|--|---|--|----|-----------------------|
| 47 | own, list the name of creditor, iden<br>check whether the payment include<br>scheduled as contractually due to ex-                                       | ns. For each of your debts that is secure tify the property securing the debt, state s taxes or insurance. The Average Mont ach Secured Creditor in the 60 months for ist additional entries on a separate page.                       | the Average Monthl<br>hly Payment is the to<br>ollowing the filing o                            | y Payment, and otal of all amounts f the bankruptcy    |    |                       |
|    | Name of Creditor   | Property Securing the Debt   | Average<br>Monthly<br>Payment   | Does payment include taxes or insurance                |    |                       |
|    |  | 621 Clark Ave.<br>Jeannette, PA  |   |  |    |                       |
|    | a. Chase Manhattan Mtge.   | FMV based on 2005 appraisal 2006 Chevy Silverado ( 40,000  |   | yes □no  □yes ■no                                      |    |                       |
|    | b. HSBC Bank   | miles, good condition )  | Total: Add Lines  | ·  | \$ | 543.20                |
| 48 | motor vehicle, or other property ne<br>your deduction 1/60th of any amou<br>payments listed in Line 47, in order<br>sums in default that must be paid in | cessary for your support or the support of the "cure amount") that you must pay to maintain possession of the property. It order to avoid repossession or forecloss additional entries on a separate page.  Property Securing the Debt | of your dependents, y<br>y the creditor in addi<br>The cure amount we<br>ure. List and total an | you may include in<br>ition to the<br>ould include any |    |                       |
|    | aNONE-   | T. W. W. B.  | \$  |  |    |                       |
|    |  |  |   | Total: Add Lines                                       | \$ | 0.00                  |
| 49 |  | claims. Enter the total amount, divided ony claims, for which you were liable at uch as those set out in Line 33.  |   |  | \$ | 0.00                  |
|    | Chapter 13 administrative expense resulting administrative expense.  | ses. Multiply the amount in Line a by the  | e amount in Line b,   | and enter the  |    |                       |
| 50 | issued by the Executive Of   | Chapter 13 plan payment. district as determined under schedules fice for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of   | \$  | 1,170.00   |    |                       |
|    | c. Average monthly administr   | rative expense of Chapter 13 case  | Total: Multiply L   | ines a and b   | \$ | 32.76                 |
| 51 | <b>Total Deductions for Debt Payme</b>   | ent. Enter the total of Lines 47 through   | 50.   |  | \$ | 575.96                |
|    |  | Subpart D: Total Deductions  | from Income   |  |    |                       |
| 52 | Total of all deductions from incor   | me. Enter the total of Lines 38, 46, and   | 51.   |  | \$ | 4,069.64              |
|    | Part V. DETERM   | INATION OF DISPOSABLE  | INCOME UND  | ER § 1325(b)(2   | 2) |                       |
| 53 | <b>Total current monthly income.</b> E   | nter the amount from Line 20.  |   |  | \$ | 4,533.64              |
| 54 |  | ly average of any child support payments<br>ported in Part I, that you received in accordary to be expended for such child.  |   |  | \$ | 0.00                  |
| 55 |  | Enter the monthly total of (a) all amound retirement plans, as specified in § 541(cified in § 362(b)(19).  |   |  |    | 0.00                  |
| 56 | Total of all deductions allowed ur   | nder § 707(b)(2). Enter the amount from  | n Line 52.  |  | \$ | 4,069.64              |
|    | I .  |  |   |  | Ψ  | -, <del>505.0</del> - |

| 57 | there is no reasonable alternative, describe the If necessary, list additional entries on a separaprovide your case trustee with documentate of the special circumstances that make such | ate page. Total the expenses and enter tion of these expenses and you must per expense necessary and reasonable. | the total in Line 57. You must rovide a detailed explanation |                       |
|----|--|--|--|-----------------------|
|    | Nature of special circumstances  |  | int of Expense   |                       |
| 37 | a. Parking & tolls (required to get t  |  | 50.00  |                       |
|    | b. Uniforms & work boots   | \$   | 40.00  |                       |
|    | c. Tools (necessity for work)  | \$   | 40.00  |                       |
|    | d. Union dues  | \$   | 20.00  |                       |
|    | e.   | \$   | A 117 '  |                       |
|    |  | Total:   | : Add Lines  | \$ 150.00             |
| 58 | Total adjustments to determine disposable result.  | <b>income.</b> Add the amounts on Lines 54   | 4, 55, 56, and 57 and enter the                              | \$4,219.64            |
| 59 | Monthly Disposable Income Under § 1325(  | <b>(b)(2).</b> Subtract Line 58 from Line 53   | and enter the result.  | \$ 314.00             |
|    | Port VI  | ADDITIONAL EXPENSE C   | I AIMS   | Ψ                     |
|    |  |  |  |                       |
|    | Other Expenses. List and describe any mont of you and your family and that you contend 707(b)(2)(A)(ii)(I). If necessary, list addition each item. Total the expenses.                   | should be an additional deduction from   | n your current monthly income u                              | ınder §               |
| 60 | Expense Description  |  | Monthly Amount   |                       |
|    | a.   | 9  |  |                       |
|    | b.   | 9  |  |                       |
|    | c.   | 9  |  |                       |
|    | d.   | Total: Add Lines a, b, c and d   |  |                       |
|    |  | Total: Add Lines a, b, c and d   | <b>D</b>   |                       |
|    |  | Part VII. VERIFICATION   |  |                       |
|    | I declare under penalty of perjury that the infemust sign.)  | ormation provided in this statement is t   | true and correct. (If this is a join                         | nt case, both debtors |
| 61 | Date: <b>June 25, 2009</b>   | Signature:   | /s/ Mitchell R Sinclair                                      |                       |
|    |  |  | Mitchell R Sinclair  |                       |